CITY OF HOLLADAY REQUEST FOR PERMISSION TO HOLD SPECIAL EVENT

- I. The City of Holladay (the "City") requires that the sponsor of any organized race, run, walk, bicycle race, block or neighborhood party, parade, carnival or similar activity occurring, in whole in part, on any of the City's public roadway or property must first obtain the City's permission initiated through submission of this form to the City at 4707 S Holladay Blvd.. Holladay UT 84117.
- II. Block and neighborhood parties shall submit paperwork with the signatures of all affected neighbors.
- III. Block and neighborhood parties, parades of less than one mile and school activities held in the immediate area of the school are exempt from the insurance requirements set for in section 14.56.100 of the City of Holladay Code of Ordinance (the "Code").
- IV. The City reserves the right to deny permit applications for proposed special events which pose a significant danger or threat to the public health, welfare or safety, or which may result in unreasonable inconvenience or cost to the public.
- V. A violation of Code section 14.56.040 is a Class B Misdemeanor. Failure to obtain a permit required by the Code may also result in enforcement action by the City which, in its discretion, may stop an event which has not been issued a permit and/or may issue citations where event staff or participants violate other state statutes or City ordinance, including, but not limited to, traffic rules and regulations, disturbing the peace, public nuisance, failure to disperse, trespass, or other health and safety regulations.
- VI. Any request for events on public roadways, except as covered by (III) above, or sponsored by the City must have obtained a certificate of insurance naming the City as an additional insured as indicated in Code section 14.56.100.

TYPE AND DESCRIPTION OF EVENT:			
ADMISSION FEE/DONATION	DATE OF EVENT	TIME OF EVENT	
CHECK FOR \$100.00 PROCESSING FEE, MAI (THE FEE OF \$100.00 MAYBE BE WAIVED A			
CERTIFICATE OF \$1,000,000 LIABILITY I INSURED ATTACHED (circle)	NSURANCE NAMING TI YES NO	HE CITY OF HOLLADAY AS ADDITIONA	4 L
NAME OF SPONSORING GROUP			
SPONSOR CONTACT			
ADDRESS		PHONE	
PROPOSED LOCATION OR ROUTE MAP & B	ARRICADE PLAN ATTAC	HED	
INCLUDE A SITE PLAN INDICATING THE LO a. Name of area b. Address c. Entrances, exits, roadways, walks & parking d. Location of rest room, water facilities	e. Waste containerf. Food stands	rst Aid Station	
YOUR EMERGENCY MEDICAL TECHNICIAN	NS WILL BE:		
AGENCY_			
ESTIMATED NUMBER OF PARTICIPANTS A EXPECTED AVERAGE SPECTATOR'S LENG	ND SPECTATORS TH OF STAY	HOURS	
WILL ANY AMPLIFIED MUSIC OR PUBLIC AT The following need to be provided by all filming scene information and any demolition information	events: Filming schedule, if		ısh
Authorized Signature		Date	

FOR OFFICE USE ONLY	
Sheriff's Office Recommendation	
	Sheriff's Signature
Health Dept. Recommendation	
	Health Dept. Signature_
Fire Dept. Recommendation	
	Fire Dept. Signature
Other	